PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

84, 401

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TC	OTAL CLAIMS		4		_			RATE	FEE	7	RATE	FEE
FO)R		NUMBER	NUMBER FILED		BER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
то	TAL CHARGEA	ABLE CLAIMS	Y mir	√ minus 20=		· 0		X\$ 9=		OR	X\$18=	
INC	DEPENDENT CL	LAIMS	ί mi	inus 3 =	* 6	7		X43=		OR	X86=	
MU	ILTIPLE DEPEN	NDENT CLAIM PI	RESENT					+145=	-	OR	+290=	
* If	the difference	e in column 1 is	less than ze	∍ro, enter	"0" in c	column 2		TOTAL	<u> </u>	OR	TOTAL	770
	С	LAIMS AS A	MENDED) - PAR	TII			`~~~			OTHER	
		(Column 1)	,	(Column		(Column 3)	٠,	SMALL		OR	SMALLE	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* ENTATION OF MU	Minus	***	- CL AIM]= '		X43=		OR	X86=	
	FIRST PRESE	.NTAHON OF IVIC	JEHPE DE	ENDEN	CLAIIVI		,	+145=		OR	+290=	
							L	TOTAL	-	OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)								ADDIT. FEE		1- ,	ADDII. FEE	
		CLAIMS		HIGHE	EST		1 r		ADDI-	i [ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
NON	Total	*	Minus	**	· 	=] [X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	CLAIM	=	\prod	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
								TOTAL ADDIT. FEE			TOTAL ADDIT. FEE	•
		(Column 1)	_	NUUII. FEE w		' '	ADDII. FELL					
ENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	##		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	1 [X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1.45			200	
* If the ntry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter *20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter *3."									OR A	TOTAL ADDIT. FEE		
7	The Highest Num	nber Previously Paid	d For" (Total or	Independe	int) is the	highest numbe	er four	nd in the app	ropriate box	in coli	umn 1.	